

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	PS	66621	9/15
O.I.P.E. CLASSIFIER			7-19-99
FORMALITY REVIEW	TMW	50976	7-21-99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 -: Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

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Claim	Date			
Final	Original	2/2/92	2/2/92	2/2/92
1	-	-	-	-
2	✓	✓	✓	✓
3	✓	✓	✓	✓
4	✓	✓	✓	✓
5	✓	✓	✓	✓
6	✓	✓	✓	✓
7	✓	✓	✓	✓
8	✓	✓	✓	✓
9	✓	✓	✓	✓
10	✓	✓	✓	✓
11	✓	✓	✓	✓
12	✓	✓	✓	✓
13	J	J	J	J
14	0	0	0	0
15	0	0	0	0
16	0	0	0	0
17	J	J	J	J
18	0	0	0	0
19	0	0	0	0
20	0	0	0	0
21	0	0	0	0
22	0	0	0	0
23	0	0	0	0
24	0	0	0	0
25	J	J	J	J
26	✓	✓	✓	✓
27	✓	✓	✓	✓
28	✓	✓	✓	✓
29	✓	✓	✓	✓
30	✓	✓	✓	✓
31	✓	✓	✓	✓
32	✓	✓	✓	✓
33	✓	✓	✓	✓
34	✓	✓	✓	✓
35	✓	✓	✓	✓
36	J	J	J	J
37	0	0	0	0
38	0	0	0	0
39	0	0	0	0
40	0	0	0	0
41	0	0	0	0
42	0	0	0	0
43	0	0	0	0
44	0	0	0	0
45	0	0	0	0
46	J	J	J	J
47	J	J	J	J
48	J	J	J	J
49	J	J	J	J
50	J	J	J	J

Claim	Date			
Final	Original	2/2/92	2/2/92	2/2/92
51	-	-	-	-
52	✓	✓	✓	✓
53	✓	✓	✓	✓
54	✓	✓	✓	✓
55	✓	✓	✓	✓
56	N	N	N	N
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Claim	Date			
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If more than 150 claims or 10 actions
staple additional sheet here

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